

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 11
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Planned Parenthood Votes		FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		M M M / D D D / Y Y Y Y Y Y 10 / 18 / 2016	

Full Name of Payee SKDKnickerbocker		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 16 / 2016	
Mailing Address 1150 18th St., NW #800		Amount 7050.00	
City Washington	State DC	Zip Code 20036	Transaction ID : B633011
Purpose of Expenditure Digital Ad Production		Category/ Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 16 / 2016
Name of Federal Candidate Ayotte, Kelly, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NH
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
		761899.22	

Full Name of Payee SKDKnickerbocker		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 11 / 2016	
Mailing Address 1150 18th St., NW #800		Amount 9125.00	
City Washington	State DC	Zip Code 20036	Transaction ID : B633012
Purpose of Expenditure Digital Ad Production		Category/ Type 004	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 11 / 2016
Name of Federal Candidate Ayotte, Kelly, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NH
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
		761899.22	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	16175.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Schifeling, Deirdre, , ,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
12 / 02 / 2016

Signature